

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I declare that:

My residence, post office address and citizenship are as stated below next to my name; I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **DIAGNOSTICS AND THERAPEUTICS FOR MACULAR DEGENERATION-RELATED DISORDERS** the specification of which is attached hereto or X was filed on February 25, 2002 as Application No. Applied for and was amended on (if applicable).

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56. I claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below:

Application No.	Filing Date
60/200,698	04/29/2000

I claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application No.	Date of Filing	Status
09/845,745	04/30/2001	Pending
09/510,230	02/22/2000	Pending

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

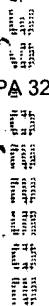
Hugh Wang, Reg. No. 47,163
Joe Liebeschuetz, Reg. No. 37,505

Send Correspondence to: Hugh Wang TOWNSEND and TOWNSEND and CREW LLP Two Embarcadero Center, 8th Floor San Francisco, California 94111-3834	Direct Telephone Calls to: (Name, Reg. No., Telephone No.) Name: Hugh Wang Reg. No.: 47,163 Telephone: 650-326-2400
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Full Name of Inventor 1:	Last Name: HAGEMAN	First Name: GREGORY	Middle Name or Initial: S.
Residence & Citizenship:	City: Coralville	State/Foreign Country: Iowa	Country of Citizenship: United States
Post Office Address:	Post Office Address: 500 Auburn Hills Drive	City: Coralville	State/Country: Iowa Postal Code: 52241

Full Name of Inventor 2:	Last Name: MULLINS	First Name: ROBERT	Middle Name or Initial: F.
Residence & Citizenship:	City: Coralville	State/Foreign Country: Iowa	Country of Citizenship: United States
Post Office Address:	Post Office Address: 2342 12 Street	City: Coralville	State/Country: Iowa Postal Code: 52241

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 1  _____ Gregory S. Hageman	Signature of Inventor 2  _____ Robert F. Mullins
Date  _____ PA 3203528 v1	Date 